

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				<b>Complete if Known</b>		
				Application Number	10/585,050	
				Filing Date	June 29, 2006	
				First Named Inventor	Susan Kay Hoiseth	
				Group Art Unit	1645	
				Examiner Name	Rodney P. Swartz	
Sheet	1	of	1	Attorney Docket Number		AM100240

### U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number (If known)	Kind Code (If Known)			
	1.	2002/136741		Gary W. Zlotnick	09-26-2002	

### FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No.	Foreign Patent Document			Name of Patentee or Applicant of Cited document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T
		Office	Number	Kind Code (If Known)				
	2.							<input type="checkbox"/>

### OTHER PRIOR ART — NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.) date, page(s), volume-issue number(s), publisher, city and/or country where published.	T
	3.	Jeurissen SH M et al; Infection and Immunity, 55(1):253-257 (1987)	<input type="checkbox"/>

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.